

Attachment A

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF WEST VIRGINIA

FILED

MAY 12 2020

ANGEL MOORMAN

Your full name

U S. DISTRICT COURT-WVND
CLARKSBURG, WV 26301

FEDERAL CIVIL RIGHTS
COMPLAINT
(BIVENS ACTION)

v.

C. WADLOW ; A. ROSE ;

N. AUSTIN ; M. BAUGHMAN ;

ZACCONE

Civil Action No.: 5:20 CV 93
(To be assigned by the Clerk of Court)

Bailey
Mazzzone
Blalock

Enter above the full name of defendant(s) in this action

I. JURISDICTION

This is a civil action brought pursuant to Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971). The Court has jurisdiction over this action pursuant to Title 28 U.S.C. §§ 1331 and 2201.

II. PARTIES

In Item A below, place your full name, inmate number, place of detention, and complete mailing address in the space provided.

A. Name of Plaintiff: ANGEL MOORMAN Inmate No.: 74306-067
Address: UNITED STATES PENITENTIARY-CANAAN
POST OFFICE BOX 300, WAYMANT, PA 18472

In Item B below, place the full name of each defendant, his or her official position, place of employment, and address in the space provided.

Attachment A

B. Name of Defendant: C. WADLOW
Position: CORRECTIONAL OFFICER
Place of Employment: FCI-HAZELTON, FEDERAL BUREAU OF PRISONS
Address: 1640 SKYVIEW DRIVE
BRUCETON MILLS, WEST VIRGINIA 26525

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? Yes No

If your answer is "YES," briefly explain: HE WAS WORKING AS A FEDERAL CORRECTIONAL OFFICER IN HIS OFFICIAL AND INDIVIDUAL CAPACITY WITH THE BUREAU OF PRISONS AT THE TIME.

B.1 Name of Defendant: A. ROSE
Position: CORRECTIONAL OFFICER
Place of Employment: FCI-HAZELTON, FEDERAL BUREAU OF PRISONS
Address: 1640 SKYVIEW DRIVE
BRUCETON MILLS, WEST VIRGINIA 26525

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? Yes No

If your answer is "YES," briefly explain: HE WAS WORKING AS A FEDERAL CORRECTIONAL OFFICER IN HIS OFFICIAL AND INDIVIDUAL CAPACITY WITH THE BUREAU OF PRISONS.

B.2 Name of Defendant: N. AUSTIN
Position: CORRECTIONAL OFFICER
Place of Employment: FCI-HAZELTON, FEDERAL BUREAU OF PRISONS
Address: 1640 SKYVIEW DRIVE
BRUCETON MILLS, WEST VIRGINIA 26525

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? Yes No

Attachment A

If your answer is "YES," briefly explain: HE WAS WORKING AS A FEDERAL CORRECTIONAL OFFICER IN HIS OFFICIAL AND INDIVIDUAL CAPACITY WITH THE BUREAU OF PRISONS.

B.3 Name of Defendant: M. BAUGHMAN
Position: CORRECTIONAL OFFICER
Place of Employment: FCI-HAZELTON, FEDERAL BUREAU OF PRISONS
Address: 1640 SKYVIEW DRIVE
BRUCETON MILLS, WEST VIRGINIA 26525

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? Yes No

If your answer is "YES," briefly explain: HE WAS WORKING AS A FEDERAL CORRECTIONAL OFFICER IN HIS OFFICIAL AND INDIVIDUAL CAPACITY WITH THE BUREAU OF PRISONS.

B.4 Name of Defendant: ZACCONE (FIRST NAME/INITIAL UNKNOWN)
Position: CORRECTIONAL OFFICER
Place of Employment: FCI-HAZELTON, FEDERAL BUREAU OF PRISONS
Address: 1640 SKYVIEW DRIVE
BRUCETON MILLS, WEST VIRGINIA 26525

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? Yes No

If your answer is "YES," briefly explain: SHE WAS WORKING AS A FEDERALLY-EMPLOYED OFFICER IN HER OFFICIAL AND INDIVIDUAL CAPACITY WITH THE BUREAU OF PRISONS.

Attachment A

B.5 Name of Defendant: _____
Position: _____
Place of Employment: _____
Address: _____

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? Yes No

If your answer is "YES," briefly explain: _____

III. PLACE OF PRESENT CONFINEMENT

Name of Prison/ Institution: CANAAN / UNITED STATES PENITENTIARY

A. Is this where the events concerning your complaint took place?
 Yes No

If you answered "NO," where did the events occur?

FCI-HAZELTON (BRUCETON MILLS, W. VIRGINIA)

B. Is there a prisoner grievance procedure in the institution where the events occurred? Yes No

C. Did you file a grievance concerning the facts relating to this complaint in the prisoner grievance procedure?
 Yes No

D. If your answer is "NO," explain why not: I TRANSFERRED TO ANOTHER PRISON, SO I PURSUED THE GRIEVANCE PROCEDURE AT NEW LOCATION.

E. If your answer is "YES," identify the administrative grievance procedure number(s) in which the claims raised in this complaint were addressed

Attachment A

and state the result at level one, level two, and level three. ATTACH GRIEVANCES AND RESPONSES: SEE ATTACHMENTS

LEVEL 1 DENIED (RESPONSE FOR INFORMATIONAL PURPOSES) # 977959-F1

LEVEL 2 DENIED (RESPONSE FOR INFORMATIONAL PURPOSES) # 977959-R1

LEVEL 3 DENIED (RESPONSE FOR INFORMATIONAL PURPOSES) # 977959-A2

IV. PREVIOUS LAWSUITS AND ADMINISTRATIVE REMEDIES

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action? Yes No

B. If your answer is “YES”, describe each lawsuit in the space below. If there is more than one lawsuit, describe additional lawsuits using the same format on a separate piece of paper which you should attach and label: “IV PREVIOUS LAWSUITS”

1. Parties to this previous lawsuit:

Plaintiff(s): _____

Defendant(s): _____

2. Court:

(If federal court, name the district; if state court, name the county)

3. Case Number:

4. Basic Claim Made/Issues Raised:

5. Name of Judge(s) to whom case was assigned:

6. Disposition:

(For example, was the case dismissed? Appealed? Pending?)

7. Approximate date of filing lawsuit:

Attachment A

8. Approximate date of disposition. Attach Copies: _____

C. Did you seek informal or formal relief from the appropriate administrative officials regarding the acts complained of in Part B?

Yes No

D. If your answer is “YES,” briefly describe how relief was sought and the result. If your answer is “NO,” explain why administrative relief was not sought.

E. Did you exhaust available administrative remedies?

Yes No

F. If your answer is “YES,” briefly explain the steps taken and attach proof of exhaustion. If your answer is “NO,” briefly explain why administrative remedies were not exhausted.

G. If you are requesting to proceed in this action *in forma pauperis* under 28 U.S.C. § 1915, list each civil action or appeal you filed in any court of the United States while you were incarcerated or detained in any facility that was dismissed as frivolous, malicious, or for failure to state a claim upon which relief may be granted. Describe each civil action or appeal. If there is more than one civil action or appeal, describe the additional civil actions or appeals using the same format on a separate sheet of paper which you should attach and label “G. PREVIOUSLY DISMISSED ACTIONS OR APPEALS”

1. Parties to previous lawsuit:

Attachment A

Plaintiff(s): _____

Defendant(s): _____

2. Name and location of court and case number:

3. Grounds for dismissal: frivolous malicious
 failure to state a claim upon which relief may be granted

4. Approximate date of filing lawsuit: _____

5. Approximate date of disposition: _____

V. STATEMENT OF CLAIM

State here, as BRIEFLY as possible, the facts of your case. Describe what each defendant did to violate your constitutional rights. You must include allegations of specific wrongful conduct as to EACH and EVERY defendant in the complaint. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, you must number and set forth each claim in a separate paragraph. UNRELATED CLAIMS MUST BE RAISED IN SEPARATE COMPLAINTS WITH ADDITIONAL FILING FEES. NO MORE THAN FIVE (5) TYPED OR TEN (10) NEATLY PRINTED PAGES MAY BE ATTACHED TO THIS COMPLAINT. (LR PL 3.4.4)

CLAIM 1: DEFENDANT(S) VIOLATED MY EIGHTH AMENDMENT RIGHT UNDER THE UNITED STATES CONSTITUTION TO BE FREE FROM CRUEL AND UNUSUAL PUNISHMENT BY VIRTUE OF USING EXCESSIVE FORCE AGAINST MY PERSON.

Supporting Facts: ⁽¹⁾ ON DECEMBER 22, 2018 I WAS PLACED IN THE PRISON'S SPECIAL HOUSING UNIT ("SHU") FOR ALLEGEDLY POSSESSING CONTRABAND (TOBACCO). THE ALLEGATIONS WERE MADE BY THE

Attachment A

NAMED DEFENDANT, C. WADLOW, ON DECEMBER 28, 2018. I WAS RELEASED FROM SHU AND RETURNED TO L-1 UNIT WITHOUT THE CONTRABAND REPORT BEING PROCESSED (2) ON DECEMBER 29, 2018 AT APPROXIMATELY 9:01 AM I UNPACKED MY PERSONAL (SEE ATTACHED PAGES FOR CONTINUATION) (c) pgs. 16-1 to 16-4.

CLAIM 2: _____

Supporting Facts: _____

CLAIM 3: _____

Supporting Facts: _____

CLAIM 4: _____

Supporting Facts: _____

Attachment A

CLAIM 5: _____

Supporting Facts: _____

VI. INJURY

Describe **BRIEFLY** and **SPECIFICALLY** how you have been injured and the exact nature of your damages.

I WAS DECLARED "DEAD" AND HAD TO BE REVIVED BY MEDICAL STAFF. MY LEFT EYE WAS BRUISED AND SWOLLEN FOR THREE DAYS. I OBTAINED OPEN-FLESH WOUNDS ON MY LEFT ARM. MY JAWBONE WAS DISLOCATED. ADDITIONALLY I HAVE BEEN CONSULTING PSYCHOLOGICAL THERAPY FOR POST-TRAMATIC STRESS SYMPTOMS.

VII. RELIEF

State **BRIEFLY** and **EXACTLY** what you want the Court to do for you. *Make no legal arguments. Cite no cases or statutes.*

GRANT A DECLARATION THAT THE ACTS OF DEFENDANT'S VIOLATED MY EIGHTH AMENDMENT RIGHTS; GRANT COMPENSATORY AND PUNITIVE DAMAGES IN THE TOTAL AMOUNT OF (\$25) TWENTY-FIVE MILLION DOLLARS; JURY TRIAL ON ALL TRIABLE ISSUES; GRANT RECOVERY OF DEFENDANT'S COST IN THIS SUIT; AND ANY OTHER RELIEF THE COURT DEEMS JUST, PROPER, AND EQUITABLE.

property and browsed the unit. At that time, Wadlow entered L-1 unit, approached me and stated, "I'll be back to get you." Wadlow then went into the officer's station, where Defendant Zaccone was working.

(3) On that same day at approximately 9:16 AM, Zaccone conducted rounds in the unit. Zaccone stopped at my cell door and stated, "You know what's about to happen, right?" Before I could reply, Zaccone walked off smiling and returned to the officers station.

(4) At 9:45 AM that same day, all inmates were locked in their cells for count. As I was cleaning my cell I heard Keys jingling and voices within the unit. I approached my cell door and noticed Defendant N. Austin and two other guards entering the officers station occupied by Zaccone. Upon information and belief, these two individuals were Defendants A. Rose and M. Baughman.

(5) On this same day at approximately 10:15 AM, Zaccone and another prison guard conducted count. Approximately 10:30 AM., I looked out of my cell window and saw Wadlow entering L-1 unit. Between 10:35 and 10:40 AM the tray slot connected to my cell door suddenly dropped. A shooting munition appeared in the opening of the slot and began firing pellets into my cell. I was struck in the face, torso, and legs with objects from the device approximately fourteen times. When the firing ceased, the cell door opened and three-to-four guards rushed

into the cell and commenced to attacking me. Upon information and belief, these individuals were Defendants A. Rose, M. Baughman, C. Wadlow, and N. Austin. I was immediately struck in my face and head with the shooting device and with walkie-talkies and fists from prison guards entering the cell. I fell to the floor, onto my stomach, wherein, the guards began kicking me in the head and back.

(6) During the assault I complied with all directives to lay down. I was already down on my stomach, sprawl-eagle. I repeatedly called out, "I can't breathe." Defendants continued plying on me as I laid on the floor. The numerous kicks and punches caused instant swelling to my left eye and were so extreme that I veered in and out of consciousness.

(7) While I layed on the floor the guards, all four of the named Defendants, handcuffed me and put me on a gurney. I again yelled, "I can't breathe." One of the guards then responded: "Shut that nigga up." Upon information and belief the guard making the comment was Defendant Wadlow. At that point I was hit and pounded in the head and face area with the cell door by guards. These blows literally killed me.

(8) I was eventually revived by medical personnel at FCI-Hazelton then subsequently transported to Ruby Memorial Hospital, where Defendants A. Rose and M. Baughman openly boasted to outside medical staff: "Yeah, we broke his

jaw"; and "We slammed a few doors on his head."

(9) While at Ruby Memorial, I was given catscans, MRI's, and X-Rays. I was treated for open-flesh wounds on my left arm and bruises to my face and head.

(10) On December 29, 2018, once I returned to FCI-Hazelton, Officer Zaccione initiated a bogus incident report against me stating that I self-mutilated in my cell and that force was necessary to constrain me. Defendants' Rose, Wadlow, Baughman and Austin submitted memorandums to this effect - all in an effort to justify assaulting me. The relevant pages of the incident report is attached at E-A.

LEGAL CLAIMS

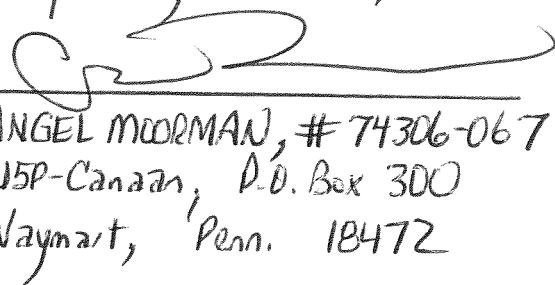
(11) Plaintiff re-alleges and incorporates by reference paragraphs 1-13.(¶11).

(12) Defendants C. Wadlow, N. Austin, Zaccione, A. Rose, and M. Baughman used excessive force against me by punching me in the face and kicking me while I was laying face-down on my stomach and was not doing anything to violate any prison rules or policy, and was not acting disruptively. Defendants' actions violated my Eighth Amendment Rights under The United States Constitution, and caused me pain, suffering, physical injury and emotional distress.

(13) Defendant Zaccone, by witnessing the other named defendants' actions, failing to report that misconduct, and by deliberately and knowingly fabricating an incident report in order to cover up the misconduct, and by encouraging same, also violated my Eighth Amendment rights, causing me gain, suffering, physical injury and emotional distress.

Dated: April 28, 2020

Respectfully submitted,

/s/ 
ANGEL MOORMAN, # 74306-067
USP-Canaan, P.O. Box 300
Waymart, Penn. 18472

CAA-1330.16
December 31, 2009
Attachment A

ATTEMPT AT INFORMAL RESOLUTION
(Request for Administrative Remedy)

The Federal Bureau of Prisons Program Statement 1330.16 Administrative Remedy Program, dated December 31, 2007, requires that inmates attempt to informally present their complaint to staff and allow staff to attempt to informally resolve any issue prior to the inmate filing a Request for Administrative Remedy, BP.229(13). If informal resolution is unable to be accomplished, the inmate will be given a BP.229(13) form.

TO BE COMPLETED BY INMATE

INMATE'S NAME: Mark Man, A

REG. NO.: 74306-067 UNIT: CHAL/100

1. Complaint (be specific. If related to UDC appeal, specify relevant section of Inmate Discipline Policy): On December 29, I was physically assaulted and attacked by various BOP prison officials while confined at FCI-Hazelton. Previously, I had filed a "sensitive" BP-9 to Mid-Atlantic Region about being assaulted by staff on a separate incident. As part of retaliation motives for that particular filing, staff at FCI-Hazelton proceeded to literally murder me. See attach.
2. What resolution is requested/expected:
I request that the involved staff be disciplined by the Bureau and that proper investigation be conducted on my allegations of misconduct. I also seek monetary and compensatory damages and full prosecutions of staff.

TO BE COMPLETED BY STAFF

3. Summary of investigation (place response on this form):
See Attached
4. What actions were taken to resolve this matter informally (place response on this form):
See Attached
5. Explain reasons for no resolution (place response on this form):
See Attached

Date & Time Issued (BP-8): 12/16/19 Unit Team Member: Jm C SWC
Date & Time Returned (BP-8): 12/17/19 Unit Team Member:
Date & Time Investigation on BP-8 Completed and (BP-9)BP229(13) issued: 12/17/19

Satellite Operations Administrator/Unit Manager Signature: [Signature]

Distribution: (1) If complaint is informally resolved, forward the original, signed and dated by the inmate, to the Unit Counselor for filing.
(2) If complaint is not informally resolved, forward the original (attached to BP-229(13) form) to the Warden's Office.

On 12/16/19, this issue was informally resolved.

Inmate Signature

Date

Informal Resolution- BP8 continuation:

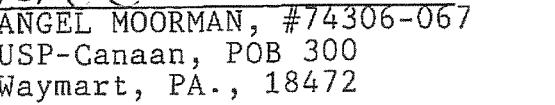
On December 29, 2018, while I was confined inside my assigned cell, various BOP correctional officers, to include C/O Rose and C/O's N. Austin and M. Baughman (along with possible C/O C. Wadlow), rushed into my cell tossing munitions and tear gas. At that point, I was hit in the face and torso area with spray guns approximately fourteen times. Once the firing ended, the officers entered the cell and I was assaulted with the gun and repeatedly punched in the face by the correctional officers. Further, I was kicked and spat on. As I fell to the floor, I was continuously beaten by C/O's Rose, Austin and Baughman (and others unidentified presently). As I was placed in handcuffs and put on a gurney, I complained about not being able to breathe, but told by the officers to "shut up, nigga," and was hit in the face with the cell door numerous times. I died from this assault, and had to be revived at an outside hospital. As I was being seen by medical staff at the hospital, officers, to include Rose, bragged about "breaking my jaw." I received numerous injuries due to this assault.

After returning to the prison, I was placed in Special Housing Unit, then subsequently put in suicide watch, with the prison officials, to include Lt. Benton, fabricating a story that I tried to commit suicide. At that point, Lt. Benton told me that he should put a case on me for filing a sensitive BP-8 against another officer (Lt. Benton) previously.

On or about 01/09/19, I received an incident report for an alleged violation of BOP Code 228 and 307, for "self-mutilation" and refusing to obey an order, when prison officials entered my cell to kill me. The incident report was created by C/O Zacccone, in an vain effort to cover-up the assault and due to retaliation for filing the sensitive BP-8 to the region offices. At the DHO hearing, I requested that staff provide a copy of the cameras' footage which occurred on the day in question. However, staff stated that such evidence was not available or failed to preserve it. DHO explained that he (D. Huff) had reviewed the camera but could not identify any evidence to support my claim of falsification of the incident report.

I was the victim of a hate crime that was inappropriately covered up by BOP staff officials, as named herein. I was the victim of retaliation methods employed by staff due to my filing against staff for prior assault.

Dated: April 22, 2019.


/s/ 
ANGEL MOORMAN, #74306-067
USP-Canaan, POB 300
Waymart, PA., 18472

ATTEMPT AT INFORMAL RESOLUTION

Moorman #74306-062

3) It is the policy of the Federal Bureau of Prisons, and the practice followed by this facility to treat all inmates in a fair and impartial manner. Additionally, allegations such as yours are taken seriously and will be given an appropriate amount of review and/or investigation. Due to the privacy interest of the staff members which you name, we are unable to disclose to you any findings or the result of our review of this matter.

4) I have spoken to staff about this incident.

5) This inmate does not wish to informally resolve this matter.

Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

From: <u>Moorman, Angel</u>	#74304-067	5-2	USP-Canaan
LAST NAME, FIRST, MIDDLE INITIAL	REG. NO.	UNIT	INSTITUTION

Part A- INMATE REQUEST

I appeal because the response to my informal brief fails to disclose facts related to my complaint and the assault I endured at the hands of BOP staff. Moreover, the response fails to provide information concerning individuals involved and evidence as to the assault. The response cites "privacy interest" of staff, and explains that I cannot be informed about any finding as a result of investigation into the matter. I appeal to exhaust my remedies for future purposes and pursue the matter of my life being literally taken as a result of misconduct by staff. As stated, on December 29, 2019, I was assaulted to the point of death at the hands of CO's Austin, Baughman, and Mallon (among others). I was beaten because of retaliatory motives for filing a sensitive PP-9 against staff. Further, I was subjected to racial harassment and misconduct due to my filings. I received a bogus incident report for self-mutilation due to my filings. Staff fabricated the incident report in an effort to ensure that May 9, 2019, the assailant was justified.

DATE

SIGNATURE OF REQUESTER

Part B- RESPONSE

DATE

WARDEN OR REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

SECOND COPY: RETURN TO INMATE

CASE NUMBER:

CASE NUMBER:

Part C- RECEIPT

Return to: <u>LAST NAME, FIRST, MIDDLE INITIAL</u>	REG. NO.	UNIT	INSTITUTION
SUBJECT: <u> </u>			

DATE

RECIPIENT'S SIGNATURE (STAFF MEMBER)



U.S. Department of Justice

Regional Administrative Remedy Appeal

Federal Bureau of Prisons

Type or use ball-point pen. If attachments are needed, submit four copies. One copy of the completed BP-229(13) including any attachments must be submitted with this appeal.

From: MURKIN, ANGEL
LAST NAME/FIRST, MIDDLE INITIAL

74306-067
REG. NO.

C2
UNIT

USP-CANAAN
INSTITUTION

Part A - REASON FOR APPEAL

I APPEAL THE BP-9 RESPONSE OF THE WARDEN ON THE BASIS THAT SUCH RESPONSE IS REPETITIVE. SPECIFICALLY, I APPEAL BECAUSE BOP OFFICIALS ARE REFUSING TO INFORM ME AS TO THE "INVESTIGATION" BEING CONDUCTED BY THE BUREAU REGARDING THE ATTEMPT TO KILL (AND DOING SO) OF MY PERSON. THE RESPONSE FURTHER CITES THAT "ANY FINDINGS" DEALING WITH THE MATTER CANNOT AND WILL NOT BE DISCLOSED TO ME. THAT MEANS, I AM UNABLE TO PURSUE PROPER RECOURSE TO ADDRESS MY ATTACKERS (BOP OFFICIALS). FINALLY, I APPEAL BECAUSE THE PRISON REMEDY PROCESS IS INADEQUATE TO FURNISH A REDRESS DUE TO MY INJURIES AND/OR ACTIONS OF BOP STAFF INVOLVED. I EXHAUST MY REMEDIES TO BRING SUIT IN FEDERAL COURT, PURSUANT TO THE PLRA (PRISONER LITIGATION).

6/18/2019
DATE


SIGNATURE OF REQUESTER

Part B - RESPONSE

See Attached Response

DATE

REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the General Counsel. Your appeal must be received in the General Counsel's Office within 30 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER: 9779591

Part C - RECEIPT

CASE NUMBER: _____

Return to: _____

LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

SUBJECT: _____

DATE

SIGNATURE, RECIPIENT OF REGIONAL APPEAL

Federal Bureau of Prisons

Type or use ball-point pen. If attachments are needed, submit four copies. One copy each of the completed BP-229(13) and BP-230(13), including any attachments must be submitted with this appeal.

From: MOORMAN ANGEL
LAST NAME/FIRST, MIDDLE INITIAL

74306-067
REG. NO.

C2
UNIT

USP-CANAAN
INSTITUTION

Part A - REASON FOR APPEAL ~~THE REGIONS RELIANCE ON THE WARDEN'S RESPONSE TO MY BP-4 WAS MISPLACED. IN THE BP-4, THE WARDEN FAILED TO ADDRESS MY CLAIM AND RESOLUTIONS IN FULL. IN MY INITIAL REQUEST I ASKED FOR AN INVESTIGATION PERTAINING TO AN ASSAULT BY STAFF WHICH I SUFFERED ON 12/29/18, AS WELL AS OTHER REMEDIES. THE ASSAULT AND BATTLEY ACTUALLY RESULTED IN MY DEATH. I HAD TO BE RELIEVED BY MEDICAL STAFF (SEE ATTACHED BP-8 FOR DETAILS) REGION CLAIMS THAT THE WARDEN ADEQUATELY ADDRESSED MY CLAIM AND THAT MY SPECIFIC ALLEGATIONS HAVE BEEN REFERRED FBOA REVIEW VIA EMPLOYEE CONDUCT. THE WARDEN SAID A COMPLETE REVIEW WOULD BE CONDUCTED; HOWEVER THE RESULTS WOULD BE WITHHELD BECAUSE I AM NOT ENTITLED TO SUCH INFORMATION. THE ISSUE I HAVE IS TWO-FOLD, FIRST, IN MY RESOLUTION I ASKED FOR MORE THAN JUST AN INVESTIGATION; I SOUGHT "OTHER" REMEDIES, NAMELY, STAFF DISCIPLINE BY THE BOP, AS WELL AS AN AWARD OF MONETARY AND COMPENSATORY DAMAGES FOR THE PHYSICAL AND EMOTIONAL DAMAGE I SUFFERED AT THE HANDS OF STAFF. I ALSO STATED THAT I WAS SEEKING FULL PROSECUTION FOR CRIMINAL LIABILITY. NONE OF THE OTHER REMEDIAL REQUEST WERE ADDRESSED OR EVEN ACKNOWLEDGED BY THE WARDEN'S RESPONSE, RENDERING SUCH RESPONSE INADEQUATE. THE REGION CHOSE TO SIMPLY REITERATE THE WARDEN'S RESPONSE, ALSO FAILING TO ADDRESS THE CORRECTIVE MEASURES I SEEK. WITH THAT SAID, I ONLY RECEIVED A PARTIAL RESPONSE THAT...~~

11/14/2019 (SEE ATTACHMENT PAGE CONTINUATION)

DATE

SIGNATURE OF REQUESTER

Part B - RESPONSE

DATE

GENERAL COUNSEL

ORIGINAL: RETURN TO INMATE

CASE NUMBER:

Part C - RECEIPT

CASE NUMBER:

Return to:

LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

SUBJECT:

DATE

SIGNATURE OF RECIPIENT OF CENTRAL OFFICE APPEAL



U. S. Department of Justice
Federal Bureau of Prisons
USP, Canaan, Pennsylvania

*Request for Administrative Remedy,
Part B - Response*

Name: Moorman, Angel
Reg. No.: 74306-067
Admin. Remedy No.: 977959-F1

This is in response to your Request for Administrative Remedy which was received in this office on May 20, 2019. You claim in your Administrative Remedy that on December 29, 2018, while housed at USP Hazelton you were assaulted by staff.

It is the policy of the Federal Bureau of Prisons, and the practice followed by this facility to treat all inmates in a fair and impartial manner. Additionally, allegations such as yours are taken seriously and will be given an appropriate amount of review and/or investigation. Due to the privacy interest of the staff members which you name, we are unable to disclose to you any findings or the result of our review of this matter.

This response is for informational purposes only. In the event you are not satisfied with this response and wish to appeal, you may do so within 20 calendar days of the date of this response by submitting a BP-230(10) to the Regional Director, Federal Bureau of Prisons, Northeast Regional Office, U.S. Customs House, 2nd and Chestnut Street, Philadelphia, PA 19106.



E. Bradley, Warden



Date

MOORMAN, ANGEL
Reg. No. 74306-067
Appeal No. 977959-R1
Page One

Part B - Response

You appeal the response of the Warden of USP Canaan and allege staff misconduct. Specifically, you allege on December 29, 2018 you were assaulted by staff at USP Hazelton. You request to know the outcome of the investigation.

A review of your appeal reveals the Warden adequately addressed your complaint. Your specific allegations have been referred for review pursuant to Program Statement 3420.11, Standards of Employee Conduct. A thorough review will be conducted; however, the results will not be disclosed to you, as you are not entitled to this information. Accordingly, your appeal is denied.

If you are dissatisfied with this response, you may appeal to the General Counsel, Federal Bureau of Prisons. Your appeal must be received in the Administrative Remedy Section, Office of General Counsel, Federal Bureau of Prisons, 320 First Street, N.W., Washington, D.C. 20534, within 30 calendar days of the date of this response.



J. RAY ORMOND
Regional Director

Date: July 24, 2019

16-(6)

Administrative Remedy Number 977959-A2

Part B - Response

This is in response to your Central Office Administrative Remedy Appeal, wherein you claim you were assaulted by staff. For relief, you request this matter be investigated.

We have reviewed documentation relevant to your appeal and, based on the information gathered, concur with the manner in which the Warden and Regional Director addressed your concerns at the time of your Request for Administrative Remedy and subsequent appeal. Allegations of staff misconduct are taken seriously. You were previously informed your complaints were forwarded to the appropriate component of the agency for review. No inmate is entitled to be apprised of the progress, outcome, or disposition of any review of alleged staff misconduct.

Accordingly, this response is for informational purposes only.

1/21/20
Date



Ian Connors, Administrator
National Inmate Appeals 

16-(7)

Attachment A

DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint and that the information contained in the complaint is true and accurate. Title 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Executed at USP-CANAAN on APRIL 28, 2020.
(Location) (Date)



Your Signature